DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

Provider Inspection Summary

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: COUNTRY JOY (0009906)

Address: N501 ZENDA RD, ZENDA, WI 53195

License Status: REGULAR

Licensed/Certified/Registered 11/24/2003

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey Histor	ry
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Survey ID: 0093249 End Date: 09/01/2004 Type: OTHER Purpose: VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0092098 End Date: 02/16/2004 Type: OTHER Purpose: COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008672 Served 03/12/2004

Compliance **Deficiencies Cited** Verified Subject Area Corrected 88.06(3)(a) INDIVIDUAL SERVICE PLAN & ASSESSMENT 08/17/2004 Yes 88.07(3)(d) MEDICATION- WRITTEN ORDER 08/17/2004 Yes Yes 88.10(3)(p) PROMPT AND ADEQUATE TREATMENT 08/17/2004

Survey ID: 0091601 End Date: 11/24/2003 Type: INITIAL Purpose: SURVEY

Results: LICENSE/CERT/REGISTRATION ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Enforcement History

Date: 03/11/2004 SOD #10008672 Appealed: No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION

NO NEW ADMISSIONS

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P.O. Box 2969
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Complaint History

Date Complaint Received: 01/21/2004 Date Investigation Completed: 02/16/2004

Subject Area(s) Result SOD #

STAFF ADEQUACY NOT SUBSTANTIATED PROGRAM SERVICES SUBSTANTIATED

SUBSTANTIATED 10008672

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